



**NEW BUCKENHAM JUNIOR FOOTBALL CLUB
PLAYERS' MEMBERSHIP APPLICATION FORM**

Young Bucks / U8 / U9 / U10 / U11 / U12 / U13 / U14 / U15 (Delete as appropriate)

A player qualifies to play for his respective age group in any competition if he/she is under the respective age on 1 September in the year that the season commences. It follows the school year i.e. U8s is Year 3 and so on to U15s, which is Year 10.

Surname:.....**Forenames:**.....

Nickname or known name:.....

Sex: male/female (delete as appropriate – NB. Boys only at U11 / U12 / U13/ U14/ U15)

Date of birth:...../...../..... **Age:**.....

Address:.....

.....

Post Code:.....

Home Tel:..... **Mobile Number:**.....

Other (emergencies):.....

Email Address:.....*(Used for communication purposes)*

School Name:.....

Chest Size:.....**Waist Size:**.....*(Required for Kit provision)*

I declare that the facts above are **CORRECT** and that I wish to play for **NEW BUCKENHAM JUNIOR F C** in the South Norfolk Youth League. I am not registered with any other football league or club.

Player's signature..... **Date**.....

(Continued overleaf)



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PARENTS / GUARDIANS INFORMATION AND DECLARATIONS:

CLUB'S CODES OF CONDUCT:

The club has established Codes of Conduct that all players / referees / officials / parents / guardians / visitors must adhere to. Copies of the Codes of Conduct are available on request or can be viewed on the Club's Website – Club Info.

MEDICAL INFORMATION:

If the player suffers from any ailment, or takes ANY medication, it would be beneficial for the Club to be privy to that information whilst the player is in our charge. If anyone wishes to discuss this matter in confidence, please contact the Club Secretary. It would also help if a spare inhaler, etc were placed in the medical bag of the appropriate team. Medication should be in a "see-through pouch" and be clearly marked with the player's name to avoid confusion. This will be for emergency use in the event of him / her having forgotten their own normal medication.

HEALTH AND SAFETY / CHILD PROTECTION:

The Club has appointed a Child Welfare Officer who has been trained to FA Standard Level. The Club has also adopted the FA Guidance procedures for Photography and Press Reports. A copy of the full procedures is available on request and can be viewed on the Club's Website.

GIFT AID:

Using Gift Aid means that for every pound you give in respect of the Membership Fee, we get an extra 25p from the Inland Revenue, helping your donation go further. Imagine what a difference that could make and it won't cost you a thing – **just indicate below**. [NB. You must pay an amount of income tax and / or capital gains tax at least equal to the tax that the charity reclaims on your donations in the tax year. You can cancel your declaration at any time by notifying the charity].

I WANT / DO NOT WANT* the charity to treat all donations I have made since 6 April 2004, and all donations I make from the date of this declaration until I notify you otherwise as Gift Aid donations. (* delete as appropriate)

I, the undersigned, agree to the terms and conditions set out under the Club's Codes of Conduct and agree to abide by them. I also give permission for New Buckenham Junior Football Club to take and use photographs of my child for press reports, website and other club publications and publicity, to administer first aid if necessary, and to transfer my child to hospital should an emergency arise.

I attach the Membership/Training Fee (as per schedule) - (Please delete as appropriate & enter amount) :

Under 8's -15's

Membership Fee	<input type="text" value="£15"/>	+ Training & Match Fee (early payment discount)	<input type="text" value="£45"/>	Less Family Discount*	<input type="text" value="£10"/>	<input type="text" value="£"/>
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Membership Fee	<input type="text" value="£15"/>	+ Autumn Fee only	<input type="text" value="£27"/>	Less Family Discount*	<input type="text" value="£10"/>	<input type="text" value="£"/>
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Young Bucks:

Membership Fee	<input type="text" value="£15"/>	+ Training & Match Fee (early payment discount)	<input type="text" value="£25"/>	Less Family Discount*	<input type="text" value="£10"/>	<input type="text" value="£"/>
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Membership Fee	<input type="text" value="£15"/>	+ Autumn Fee only	<input type="text" value="£16"/>	Less Family Discount*	<input type="text" value="£10"/>	<input type="text" value="£"/>
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* The family discount applies to the second child or any further children from the same parent or guardian.

Cheques should be made payable to New Buckenham Junior Football Club.

The player's name should be written on the back of the cheque.

Name of Parent/Guardian (Block Capitals)*:.....

Parent/ Guardian Signature..... **Date**.....

(* This should be the tax-payer where a GIFT AID declaration has been made)

Full Address (if different to Players address):

.....
.....

Post Code:.....

Accepted by Treasurer:.....Date.....

Fee Received: £.....

Team Manager:.....

Club Secretary:.....(*Membership Records*)